

Girl Scout Feedback Form

NASA Aerospace Badge Resource Kit

Please mail this form to:

Education Program Manager - Girl Scout Aerospace Badge Project
NASA Glenn Research Center
21000 Brookpark Rd, Mail Stop 110-3
Cleveland, OH 44135

Troop Leader Name: _____ Troop No. _____

State: _____ County: _____ Age Level _____

Your Home Zip Code: _____ Your School Zip Code if known: _____

Date _____

1. Completing this badge was a valuable experience.

___ Strongly Agree ___ Agree ___ Neutral ___ Disagree ___ Strongly Disagree

2. I wanted to earn this badge because:

3. This program helped you better understand careers in science, mathematics and/or technology.

___ Strongly Agree ___ Agree ___ Neutral ___ Disagree ___ Strongly Disagree

4. This Program will help me in school.

___ Strongly Agree ___ Agree ___ Neutral ___ Disagree ___ Strongly Disagree

5. Name three things that you learned about Aerospace.

6. Rate your level of interest in the following areas before and after completing the Aerospace Badge, using a scale of 1-5, where 5 is the highest.

BEFORE

Mathematics

Science

Engineering

Technology

AFTER

7. What one specific incident or event during the Program do you remember the most?:

8. Please list what you think were the best parts of earning this badge:

9. Please list any aspects of the Program you would change or eliminate:

10. Would you recommend earning this badge to others?

___ Yes ___ No

11. Other comments?

Thank you for taking the time to complete this evaluation. Your comments are appreciated.